FEC FORM 1

STATEMENT OF ORGANIZATION

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FORM 1		ORGANIZ	ATION		O AM 8: 30
NAME OF COMMITTEE (in	n full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5	
Grass Roo	ts Initia	ative to Maintair	n Our Majority P	olitical Act	ion Committee
a/K/a	GR	IMM PAC	? *	1.	
ADDRESS (number a	nd street)	P.O. Box 248	5		
(Check if an is changed)		Springfield		VA 2	2152
			CITY	STATE	ZIP CODE
COMMITTEE'S E-MA	AIL ADDRES	SS (Please provide only one e			
(Check if	address	grimmpac@c	oncentricoffice,	com	
is change	ed)				
COMMITTEE'S WEB	PAGE ADI	DRESS (URL)			
(Check if	address				
is change					
2. DATE 01	<u> </u>	2012.			
3. FEC IDENTIFIC	CATION NU	JMBER CO	0497677		
4. IS THIS STATE	MENT	NEW (N) OR	AMENDED (A)		
certify that I have e	examined th	is Statement and to the best	of my knowledge and belief i	t is true, correct a	nd complete.
Type or Print Name	of Treasure	Robert F. Ca	ırlin		
Signature of Treasure	er <u>f</u>	Pobert D. (Parlin	Date Ö1 [™]	′ <u>05</u> ° ′ <u>2012 `</u>
NOTE: Submission of			may subject the person signing ON SHOULD BE REPORTED V		e penalties of 2 U.S.C. §437g.
Office Use Only			For further information of Federal Election Commiss Toll Free 800-424-9530		FEC FORM 1 (Revised 02/2009)

	FEC Fo	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE	
	naldate	Committee:	
(a)		This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Complinformation below.)	lete the candidate
	ne of ididate		
	didate y Affiliati	on Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	Street address and
	ne of didate		
Par	ty Con	nmittee:	
(d)			Democratic, epublican, etc.) Party.
Pol	itical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.)	ected organization is a:
		Corporation W/o Capital Stock	Labor Organization
		Membership Organization Trade Association	Cooperative
		In addition, this committee is a Lobbyist/Registraot PAC.	
(f)	\times	This committee supports/opposes more than one Federal candidate, and is NOT a separate seg committee. (i.e., nonconnected committee)	regated fund or party
		In addition, this committee is a Lobbyist/Registrani PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joir	nt Fund	Iraising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which ie an authorized committee of a fedoral candidate.	or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	or more political
	Com	mittees Participating in Joint Fundraiser	
	1.		
	1.		
	2.	FEC ID number C	
	3.	FEC ID number C	
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FEC Form 1 (Revis	ed 02/2009)	Page 3
Write or Type Committee N		raye 3
	itiative to Maintain Our Majority Politic	al Action Committee
	ed Organizătion, Affiliated Committee, Joint Fundraising Representa	
Michael Grimr	<u>n </u>	
Mailing Address	[7308 13th Avenµe	
	Brooklyn	Y 1,1228 -
	CITY STAT	TE ZIP CODE
Relationship: Conne	cted Organization Affiliated Committee Joint Fundraising Repres	sentative Leadership PAC Sponsor
7. Custodian of Records: books and records.	Identify by name, address (phone number optional) and position of t	the person in possession of committee
Full Name Ros	ert F. Carlin	
Mailing Address	P.O. Box 2485	
		.
	Springfield VA	22152
Title or Position	CITY STATE	E ZIP CODE
Treasurer	Telephone number	[703,]-[569,]-[9400
B. Treasurer: List the name any designated agent (e.	and address (phone number optional) of the treasurer of the commg., assistant treasurer).	nittee; and the name and address of
Full Name of Treasurer	ert F. Carlin	
Mailing Address	P.O. Box 2485	
	[Springfield] V	4 [22152]-[
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	703, - 569, - 9400

FEC Form 1 (Re	evised 02/2009)		Page 4
Full Name of Designated Agent			
Mailing Address			
	CITY	STATE	ZIP CODE
Title or Position			
	<u>IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII</u>	number	
safety deposit boxes or Name of Bank, Deposit		·	,
safety deposit boxes or Name of Bank, Deposit	maintains funds.	· 	
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Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received. **Date of Receipt Hand Delivered** Postmarked **USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified Postmarked **USPS Priority Mail** Delivery Confirmation™ or Signature Confirmation™ Label **Postmarked USPS Express Mail** Postmark Illegible No Postmark **Shipping Date Overnight Delivery Service (Specify): Next Business Day Delivery Date of Receipt** Received from House Records & Registration Office **Date of Receipt** Received from Senate Public Records Office **Date of Receipt** Received from Electronic Filing Office **Date of Receipt or Postmarked** Other (Specify): **PREPARER** DATE PREPARED